FORM D

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB Approval

1409210

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AUG 0 7 2007

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY
Prefix Serial

DATE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate CharterMac Corporate Partners XXXIV, L.P.	change.)	
	Section 4(6) ULOE	
Type of Filing: ☐ New Filing ☐ Amendment		
A. BASIC IDENTIFICATION DAT	A	
1. Enter the information requested about the issuer		
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	<del></del>	7 A BARLII   1801   1 A BARLI   1801   18 A BARLII   18 A BARIII   18 A BARTII   18 A
CharterMac Corporate Partners XXXIV, L.P.		07074318
Address of Executive Offices (Number and Street, City, State, Zip Code) 625 Madison Avenue, New York, New York 10022	Telephone Number (Inclua 212-588-2100	0.0
Address of Principal Business Operations (Number and Street, City, State, Zip Code)	Telephone Number (Including	Area Code)
(if different from Executive Offices)		<u> </u>
Brief Description of Business	)	
Invest in real estate		
Type of Business Organization AU6 U 8 2007 2		
corporation Imited partnership, already formed /-	other (please speci	ify):
business trust limited partnership the option of the limited partnership the limited par	<u>.</u>	
Actual or Estimated Date of Incorporation or Organization:	Year  0 6 ⊠ Actual	] Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for	State; D E	
CN for Canada; FN for other foreign jurisdiction)		

#### **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

#### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICAT	TION DATA						
2. Enter the information requested for the following:							
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>							
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;</li> </ul>							
Each executive officer and director of corporate issuers and of corpora	ate general and manag	ing partners of par	tnership issuers; and				
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)  CCL Asset Managers XXXIV, LLC							
Business or Residence Address (Number and Street, City, State, Zip Code) 625 Madison Avenue, New York, New York 10022	· · · · · · · · · · · · · · · · · · ·						
Check Box(es) that Apply:  ☐ Promoter ☐ Beneficial Owner ☐	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)  Centerline Affordable Housing Advisors, LLC (formerly Charter)	Mac Capital LLC)						
Business or Residence Address (Number and Street, City, State, Zip Code) 625 Madison Avenue, New York, New York 10022							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual)  Hirmes, Alan P.							
Business or Residence Address (Number and Street, City, State, Zip Code) 625 Madison Avenue, New York, New York 10022							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒	Executive Officer	Director	General and/or Managing Partner				
Full Name (Last name first, if individual) Schnitzer, Marc D.		-					
Business or Residence Address (Number and Street, City, State, Zip Code) 625 Madison Avenue, New York, New York 10022							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if individual)  Weil, Andrew J.		_					
Business or Residence Address (Number and Street, City, State, Zip Code) 625 Madison Avenue, New York, New York 10022							
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐	Executive Officer	☐ Director	General and/or Managing Partner				
Full Name (Last name first, if individual)							
Business or Residence Address (Number and Street, City, State, Zip Code)							

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Answer also in Appendix, Column 2, if filting under ULOE.   2   What is the minimum investment that will be accepted from any individual?   Samuel Filting under ULOE.   \$5,000,000	B. INFORMATION ABOUT OFFERING														
A	Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								_						
3. Does the offering permit joint ownership of a single unit?	2. What is the minimum investment that will be accepted from any individual?							\$5,000	,000 <u>°</u>						
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer roll of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer. If more than five (5) persons to be listed are associated person or dealer for the or dealer only.  Full Marie (Last name first, if individual)  Marie (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers  (Check "All States" or check individual States).    All States   State							•	·							
Business or Residence Address (Number and Street, City, State, Zip Code)   1266 Furnace Brook Parkway   Name of Associated Broker or Dealer Quinery, Massachusetts 02169	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or														
Business or Residence Address (Number and Street, City, State, Zip Code)   1266 Furnace Brook Parkway	Full Na	•													
Name of Associated Broker or Dealer Quincy, Massachusetts 12169	Busine	ss or Res	idence A	ddress (?	Number ar	nd Street,	City, State	, Zip Code	)						
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)   DET															
All States   Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Name o														
ILL   V   IN   ILA   IKS   IKY   ILA   IME   IMD   IMA   IMI   IMN   IMS   V   IMO   IMT   INE   INV   INH   INJ   INM   INY   INC   IND   IOH   V   IOK   IOR   IPA   INT		n Which	Person I	Listed Ha	s Solicite				-					] All Stat	es
[MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] ✓ [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] ✓ [WA] [WV] [WI] [WY] [PR]   Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	[AL]	[AK]	[AZ]	[AR]	[CA] <b>✓</b>	[CO]	[CT] ✓	[DE] <b>✓</b>	[DC] <b>✓</b>	[FL]	[GA]	[HI]	[ID]		
RI	[IL] <b>✓</b>	[N]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS] 🗸	[MO]		
Full Name (Last name first, if individual)					• •			• •	• •						
Name of Associated Broker or Dealer					<u> </u>	[UT]	[VT]	[VA] ✓	[WA]	[WV]	[WI]	[WY]	[PR]		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)	Full Na	ame (Last	t name fi	rst, if ind	lividual)										
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)   All States   All States or check individual States   All S	Busine	ss or Res	idence A	ddress (1	Number ar	nd Street,	City, State	e, Zip Code	)			·		·	•
All States   Check   All States   CA   CA   CO   CT   [DE   DC   [FL   GA   [HI]   [ID   [IL]   [IN   [IA]   [KS   [KY   [LA]   [ME   [MD   [MA]   [MI   [MN   [MS   [MO   [MT   [NE]   [NV   [NH]   [NJ   [NM]   [NY   [NV   [NM]   [NV   [NV   [WI   [WY   [VY   [VA]   [WA]   [WV   [WI   [WY   [VY   [VY   [VA]   [VY   [VX   [X   [	Name o	of Associ	ated Bro	ker or De	ealer										
[IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]         [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]         [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]         Full Name (Last name first, if individual)         Business or Residence Address (Number and Street, City, State, Zip Code)         Name of Associated Broker or Dealer         States in Which Person Listed Has Solicited or Intends to Solicit Purchasers         (Check "All States" or check individual States)         [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]         [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]         [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]         [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]												**********		All State	es
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RI   SC   SD   TN   TX   UT   VT   VA   WA   WV   WI   WY   PR								• •		• •					
Full Name (Last name first, if individual)  Business or Residence Address (Number and Street, City, State, Zip Code)  Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)						-							• •		
Name of Associated Broker or Dealer  States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)															
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers         (Check "All States" or check individual States)       All States         [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]         [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]         [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]         [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]	Business or Residence Address (Number and Street, City, State, Zip Code)														
(Check "All States" or check individual States)	Name of Associated Broker or Dealer														
[IL]     [IN]     [IA]     [KS]     [KY]     [LA]     [ME]     [MD]     [MA]     [MI]     [MN]     [MS]     [MO]       [MT]     [NE]     [NV]     [NH]     [NJ]     [NV]     [NC]     [ND]     [OH]     [OK]     [OR]     [PA]       [RI]     [SC]     [SD]     [TN]     [TX]     [UT]     [VA]     [WA]     [WV]     [WI]     [WY]     [PR]								All State	es						
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[R!] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]		-													
	[KI]	[90]	ใจเป	[IN]									[PK]		

\* Unless waived by General Partner.

C. OFFERING PRICE, NUMBER OF INVESTO		
<ol> <li>Enter the aggregate offering price of securities included in this off "none" or "zero". If the transaction is an exchange offering, check to securities offered for exchange and already exchanged.</li> </ol>	this box $\square$ and indicate in the columns below	w the amounts of the
Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	<b>s</b>	\$
Equity		\$
☐ Common ☐ Preferred		· · · · · · · · · · · · · · · · · · ·
Convertible Securities (including warrants)	\$	\$
Partnership Interests		•
Other (Specify)-	<b>\$</b>	\$
Total	\$ <u>165,000,000</u>	\$165,000,000
depending upon the purchase method selected. However, the Offering contribute an aggregate of \$1,000,000 per Unit purchased regardless contribute more or less than \$1,000,000 per Unit. In addition, the fees amount.  2. Enter the number of accredited and non-accredited investors who had amounts of their purchases. For offerings under Rule 504, indicated the selection of the sele	s as to the purchase method selected. Involutional below are based upon such assume ave purchased securities in this offering and e the number of persons who have purchase	vestors may actually ed gross subscription the aggregate dolla
aggregate dollar amount of their purchases on the total lines. Enter "(	o" if answer is "none" or "zero."  Number  Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	<u></u>	\$165,000,000
Non-accredited Investors	<u>0</u>	\$0
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under I	ULOE.	
3. If this filing is for an offering under Rule 504 or 505, enter the info offerings of the types indicated, in the twelve (12) months prior to the listed in Part C-Question 1.		
Type of Offering	Type of Security	Dollar Amount Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$ <u>_</u>
Total		\$
4. a. Furnish a statement of all expenses in connection with the issu amounts relating solely to organization expenses of the issuer. The ir amount of an expenditure is not known, furnish an estimate and check	information may be given as subject to future the box to the left of the estimate.	contingencies. If the
Transfer Agent's Fees		\$
Printing and Engraving Costs		\$
Legal Fees	⊠	\$250,000
Accounting Fees		\$
Engineering Fees		\$
Sales Commissions (specify finders' fees separately) placemen		\$ <u>825,000</u>
Other Expenses (identify) <u>due diligence, organization fee</u>		\$ <u>987,500</u>
Total		\$
b. Enter the difference between the aggregate offering price given in response to Part C-Question 4.a. This difference is the "adjusted gros		

5. Indicate below the amount of the adjusted gross pro the amount for any purpose is not known, furnish a listed must equal the adjusted gross proceeds to the	an estimate and check the box to the left	of the estimate. The	
		Payments to Officers, Directors &	Payments To
		Affiliates	Others
Salaries and fees		□ \$	□ \$
Purchase of real estate		□ s	<b>S</b> \$ <u>4,125,500</u>
Purchase, rental or leasing and installation of	machinery and equipment	□ <b>\$</b>	□ <b>\$</b>
Construction or leasing of plant buildings and	facilities	□ \$	□ \$
Acquisition of other businesses (including the offering that may be used in exchange for the pursuant to a merger)	assets or securities of another issuer	m e	□ <b>\$</b>
Repayment of indebtedness (interest expense			□ \$ □ \$_151,387,500
Working capital	<del>-</del>		□ \$
• .			
Other (specify): partnership management for Column Totals			
Total Payments Listed (column totals added)			
Total Layments Listed (column totals added)		······························· 1221 JF	102,737,300
D.	FEDERAL SIGNATURE		
The issuer has duly caused this notice to be signed by the following signature constitutes an undertaking by the is request of its staff, the information furnished by the issuer that the signal is the staff of the signal is th	suer to furnish to the U.S. Securities and	<b>Exchange Commissio</b>	n, upon written
Issuer (Print or Type)	Signature	Date:	
Centerline Corporate Partners XXXIV, L.P. (formerly CharterMac Corporate Partners XXXIV, L.P.)	MWN	July 3/, 2007	
Name of Signer (Print or Type)	Title of Signer (Print or Type)		
Andrew J. Weil	Vice President of CCL Asset Manage	ers XXXIV LLC, Ge	neral Partner
	ATTENTION		
Intentional misstatements or omissions of fa	ct constitute federal criminal viol	ations. (See 18 U.)	S.C. 1001.)

 $\mathbb{E}\mathcal{N}\mathcal{D}$